

SAMPLE
HAZARDOUS WASTE FACILITY

CERTIFICATE OF LIABILITY INSURANCE

1. THE ROYAL INSURANCE COMPANY OF AMERICA, 150 William Street,
New York, N. Y. 10038

hereby certifies that it has issued Liability insurance covering Bodily Injury and Property Damage to Alcolac, Inc., 3440 Fairfield Road, Baltimore, Maryland 21226 in connection with the Insured's obligation to demonstrate Financial Responsibility under 40CFR264.147 or 265.147.

The coverage applies at Alcolac, Inc. E.P.A.I.D.#MOD084093368,
Randall Road, Sedalia, MO.
for sudden accidental occurrences.

The limits of liability are \$5,000,000. each occurrence and \$5,000,000. annual aggregate, exclusive of legal defense costs. The coverage is provided under Policy No. pending, issued on pending. The effective date of said policy is 12/31/82.

2. The Insurer further certifies the following with respect to the insurance described in Paragraph 1:

- (a) Bankruptcy or insolvency of the insured shall not relieve the Insurer of its obligations under the policy.
- (b) The Insurer is liable for the payment of amounts within any deductible applicable to the policy, with a right of reimbursement by the insured for any such payment made by the Insurer. This provision does not apply with respect to that amount of any deductible for which coverage is demonstrated as specified in 40CFR 264.174 (f) or 265.147 (f.)
- (c) Whenever requested by a Regional Administrator of the U. S. Environmental Protection Agency (EPA), the Insurer agrees to furnish to the Regional Administrator a signed duplicate original of the policy and all endorsements.
- (d) Cancellation of the insurance, whether by the Insurer or the insured, will be effective only upon written notice and only after the expiration of sixty (60) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region (s) in which the facility (ies) is (are) located.
- (e) Any other termination of the insurance will be effective only upon written notice and only after the expiration of thirty (30) days after a copy of such written notice is received by the Regional Administrator(s) of the EPA Region(s) in which the facility(ies) is (are) located.

I hereby certify that the wording of this instrument is identical to the wording specified in 40CFR 264.151(j) as such regulation was constituted on the date first above written, and that the Insurer is licensed to transact the business of insurance, or eligible to provide insurance as an excess or surplus lines insurer, in one or more States.



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Name and Address of Certificate Holder:-

U.S. Environmental Protection Agency

Air and Waste Management Division Region VII

324 E. 11th St., Kansas City, MO. 64106

[Handwritten Signature]

Signature of authorized representative of Insurer

Authorized Representative of THE ROYAL INSURANCE COMPANY OF AMERICA

Address of Representative:

ROYAL INSURANCE CO. OF AMERICA

150 William Street, New York, N. Y. 10038

**REED STEWHOUSE INC. OF NEW YORK
150 WILLIAM STREET
NEW YORK, NEW YORK 10038**